



# Flexible Benefits

**Your Flexible Benefit Plan Can Save You  
Hundreds of Dollars Each Year!**



Flexible Spending Accounts are a great way for you to save money on your out-of-pocket health and dependent care expenses. When you sign up for the Flexible Spending Accounts, your contributions are taken from your paycheck before taxes are calculated. This saves you money and makes budgeting easier.



## Here's how you could save:

The Flexible Spending Accounts let you save by paying for expenses with tax-free dollars. Here's what that means to your take-home pay:

Annual Income and Expenses	Without FSA	With FSA
Your Total Pay	\$36,000	\$36,000
Annual FSA Contribution	N/A	\$2,000
Taxable Income	\$36,000	\$34,000
Social Sec. and Medicare Tax	\$2,750	\$2,600
Federal and State Income Tax	\$5,200	\$4,700
Total Taxes	\$7,950	\$7,300
After-tax Expenses	\$2,000	N/A
Net Spendable Income	\$26,050	\$26,700
<b>Estimated Tax Savings with FSAs</b>		<b>\$650</b>

## Two ways to save:

You can tailor your Flexible Spending Accounts to fit your personal needs. There are two ways to save:

### The Health Care Spending Account

lets you use tax-free money for out-of-pocket medical, dental, vision, prescription drug, and other expenses related to you and your dependents' health care.



### The Dependent Care Spending Account

lets you use tax-free money to pay for dependent child or elder day care. If you take an income tax exemption for the dependent and have expenses related to their day care that enables you or your spouse to work, you can use this account to save money. If you are single or married and filing jointly, you can set aside up to \$5,000 per year, for one or more dependents (if you are married filing separately, the limit is \$2,500).



Eligible Items*	Ineligible Items*
<b>HEALTH CARE:</b>	
<ul style="list-style-type: none"> <li>■ Acupuncture, acupressure, chiropractic care</li> <li>■ Copays and deductibles</li> <li>■ Dental care and orthodontia</li> <li>■ Drug and medical supplies</li> <li>■ Eye care: glasses, LASIK, contacts, contact lens solution</li> <li>■ Family planning (contraceptives, fertility treatments)</li> <li>■ Hearing aids</li> <li>■ Medical devices: crutches, braces, slings, walkers</li> <li>■ Prescription drugs and medicines</li> <li>■ Physical therapy</li> <li>■ Smoking cessation programs</li> <li>■ Surgery (to treat injury or medical condition)</li> </ul>	<ul style="list-style-type: none"> <li>■ COBRA Premiums or premiums for other health plans</li> <li>■ Cosmetic surgery, Botox, Liposuction</li> <li>■ Cosmetic dentistry (whitening, veneers)</li> <li>■ Fitness programs for general health</li> <li>■ Over-the-counter medication without a prescription</li> <li>■ Personal care items such as shampoo, toothpaste, etc.</li> <li>■ Supplements for general health</li> <li>■ Vitamins for general health</li> </ul>
<b>DEPENDENT CARE:</b>	
<ul style="list-style-type: none"> <li>■ Before/after school programs</li> <li>■ Day care centers</li> <li>■ In-home day care or elder care</li> <li>■ Nanny fees</li> <li>■ Preschool</li> <li>■ Senior center day programs</li> <li>■ Summer day camp</li> </ul>	<ul style="list-style-type: none"> <li>■ Babysitter for non-work events</li> <li>■ Day care during volunteer work</li> <li>■ Long-term care facility fees</li> <li>■ Overnight camp</li> <li>■ Private grade school tuition</li> <li>■ Retirement home facility fees</li> <li>■ Summer School</li> </ul>

\* This is a partial list. Access to an extensive list of eligible items is available on TRI-AD's FSA Participant Toolkit, or by logging into your FSA account at [www.tri-ad.com/fsa](http://www.tri-ad.com/fsa).



## Things to Consider Before Enrolling

Because Flexible Spending Accounts (FSAs) are governed by Section 125 of the Internal Revenue Service (IRS) code, there are specific rules and regulations that affect the way they operate.

- **Elections must be made in advance.** You must decide before the beginning of the plan year how much you want to contribute to your health and dependent care spending accounts.
- **You can only change your election under limited circumstances.** Once you have made your election for the year, you can change it if you have a qualified status change event. These include marriage, divorce, birth or death of a dependent, a spouse losing a job or starting a new one, or a qualified leave under the Plan. The change in your election must coincide with the event.
- **You need to budget carefully.** The IRS mandates that any money left in your account at the end of the plan year cannot be recovered. You will, however, have a run-out period after the end of the plan year to get reimbursed for any expenses you incurred during the plan year.
- **Money from one account can't be used for the other account's expenses.** Health care account money can only be used for health care expenses, and dependent care account money can only be used for dependent day care expenses.



## How the Plan Works

The FSA plan has five easy steps:

1. Make your health and/or dependent care account elections during your company's open enrollment period.
2. Incur your health and/or dependent care expenses during the plan year.
3. Retain receipts and the necessary documentation to support your claims.
4. Submit your claims and backup documentation to TRI-AD.
5. TRI-AD reimburses you.

## Need More Information?

**Via phone at (888) 844-1372.** Our Participant Services representatives are available from 5:00 a.m. to 6:00 p.m. Pacific Time to answer your questions.

**Online at [www.tri-ad.com/fsa](http://www.tri-ad.com/fsa).** TRI-AD's FSA website provides much more information including a complete, up-to-date listing of eligible expenses, educational materials and other features.

## Filing a Claim is as Easy as 1-2-3

1. **Log into your account and enter your claim:** Log into your FSA account at [www.tri-ad.com/fsa](http://www.tri-ad.com/fsa) and click New Claim and provide your claim information or use the Benefits by TRI-AD mobile app.
2. **Provide the supporting documentation.** IRS rules say that your documentation must show:
  - The date the service was incurred (not the date you paid the bill)
  - The service provider's name
  - To whom the service was provided
  - The charges or out-of-pocket expense amount
  - A clear and detailed description of service or item

**Acceptable documentation:** Examples of acceptable documentation are: insurance company Explanation of Benefit forms (EOBs), receipts showing the above information, and "bag tags" for prescriptions.

**Unacceptable documentation:** Bank card statements, insurance company claim forms, canceled checks, estimates of expenses and balance forward statements are not valid documentation.
3. **Upload your documentation:** After you provide your basic claim information, you can upload your documentation at that time right to TRI-AD's site, and attach it to your claim as part of filing the claim. If you don't have a scanner, you can print a special cover sheet and fax it with your documentation to TRI-AD as instructed on the cover sheet. Mobile app users may take a photo of their receipts to submit right through the phone.

## Contact Information

TRI-AD Participant Services representatives are available Monday through Friday from 5:00 a.m. to 6:00 p.m. Pacific Time.

Phone: (888) 844-1372

FSA Fax: (866) 233-4741 or (760) 233-4741

Web: [www.tri-ad.com/fsa](http://www.tri-ad.com/fsa)

Email: [flexmail@tri-ad.com](mailto:flexmail@tri-ad.com)

The information contained herein is considered to be general in nature. In the event that anything on this flyer differs from the information contained in your company's plan provisions as set forth in the Summary Plan Description and/or Plan document, those documents shall prevail.

